



# City of Kansas City, Missouri Human Relations Department

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## MINORITY / WOMEN / DISADVANTAGED BUSINESS ENTERPRISE ANNUAL UPDATE

This annual update form is required by the City of Kansas City, Missouri in order to keep your MBE / WBE / DBE eligibility status. When submitting this form you are **required** to enclose the following:

- Most recent Federal Income Tax Returns, Personal and Business
- Sign and notarize the "No Change Affidavit"
- Documentation from the attached Document Request Checklist

### GENERAL INFORMATION

Name of Firm:		
Street Address:		
Mailing Address:		
City:	State:	Zip: -
Owner of Firm:	Telephone Number: ( ) -	
Describe the primary business activity of the firm:		
Person preparing this application:	Title:	For purpose of receiving notices from KCMO Fax: ( ) - E-mail:

### OWNERSHIP

Items such as amendments to any corporate by-laws or partnership agreements, transfers or issuance of stock, changes in management personnel or corporate officers, etc. should be enclosed. Note: failure to disclose all information concerning the control and ownership of the firm may lead to decertification of the firm.

#### Attach additional sheets if necessary.

Has the ownership structure of the company changed in the past year? YES <input type="checkbox"/> NO <input type="checkbox"/>
Select current company structure: ( <b>NONE SELECTED</b> ). If Other, indicate what type:

List equipment purchased or leased in the past year with value greater than \$1,000.00

Type of Equipment	Make	Model	Year	Date Acquired	Present Value
					\$
					\$
					\$

List five largest contracts completed in past year.

Owner/Contractor	Phone	Contract Amount	Project Name/Location	Type of Work Performed
	( ) -	\$		
	( ) -	\$		
	( ) -	\$		
	( ) -	\$		
	( ) -	\$		

### PERSONAL NET WORTH INFORMATION (FOR FIRMS THAT HAVE DBE CERTIFICATION)

Have you acquired any personal assets or liabilities in the last year? YES ☐ NO ☐

If answered "YES", list details below: Note: Attach proof of change in assets or liabilities.

Description	Acquired/Sold	Names on Assets	Liabilities Against Asset	Value of Asset
	Please Select			\$
	Please Select			\$
	Please Select			\$

The Area Below Is Provided For Additional Information Pertaining To Any Questions Listed In This Application. Also, Describe Any Changes To The Management, Ownership Or Control Of The Firm Which Occurred In The Past Year. Include Such Items As Amendments To Any Corporate By-Laws Or Partnership Agreements, Transfers Or Issuance Of Stock, Changes In Management Personnel Or Corporate Officers, Etc.

Please Be Specific And Detailed.

***Note: Failure To Disclose All Information Concerning The Control And Ownership Of The Firm May Lead To Decertification Of The Firm.***

## **No Change Affidavit**

**For all firms:**

I \_\_\_\_\_ (Owner's name) swear<sup>1</sup> (or affirm) that there have been no changes in \_\_\_\_\_'s (Company's name) circumstances affecting its ability to meet the size, ownership, or control requirements of 49 CFR Part 26, 13 CFR Part 121, and/or KCMO Ordinance 38-100.4. I swear (or affirm) there have been no material changes in the information provided with the application for certification, except for any changes about which I have provided written notice to Kansas City, Missouri pursuant to 49 CFR § 26.83(i) and/or KCMO Ordinance 38-100.4(n).

I swear (or affirm) that I am socially disadvantaged because I have been subjected to racial or ethnic prejudice or cultural bias, or have suffered the effects of discrimination, because of my identity as a member of one or more of the groups identified in 49 CFR § 26.5 and or 38-84(29), without regard to my individual qualities. I specifically swear (or affirm) that my firm continues to meet the Small Business Administration (SBA) business size criteria. I am providing the attached size and gross receipts documentation to support this affidavit.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ \*

**For all firms that have DBE certification, sign again below:**

I swear (or affirm) that my firm meets the overall gross receipts cap of 49 CFR Part 26 and the average annual gross receipts (as defined by SBA rules) **over** the previous three fiscal years do not exceed \$22.41 million. I further swear (or affirm) that my personal net worth does not exceed \$1.32 Million, and that I am economically disadvantaged because my ability to compete in the free enterprise system has been impaired due to diminished capital and credit opportunities as compared to others in the same or similar line of business who are not socially and economically disadvantaged.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_ \*

\*Must be signed by at least one officer if a corporation; one disadvantaged partner if a Partnership; or the proprietor if a Sole Proprietorship.

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<sup>1</sup> Knowingly and willfully providing false information to the government is a violation of 18 U.S.C. Section 1001 (False Statements) and RSMo 575.050 (False Affidavit) and could subject you to fines, imprisonment or both.

State of

County (and/or City) of

On this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, (name) \_\_\_\_\_,  
appeared before me and known to me personally, who, being duly sworn, did execute the foregoing affidavit and did  
state that he or she was properly authorized by (name of firm) \_\_\_\_\_, to execute the  
affidavit and did so as his or her free act and deed.

In witness whereof, I hereunto set my hand and official seal

\_\_\_\_\_

Notary Public

Print Name:

\_\_\_\_\_

My commission expires:

\_\_\_\_\_

## MWDBE DOCUMENT REQUEST CHECKLIST

(Attach All Documents to This Form)

### ALL FIRMS

- ☐ 1. Personal Financial Statement if renewing DBE certification
- ☐ 2. Copy of business federal income tax returns for the past year.
- ☐ 3. Copies of personal federal income tax returns for the past year.
- ☐ 4. End of year Balance Sheets and Income Statements for the last year
- ☐ 5. Current Licenses/Permits Required to Provide Service or Product (i.e., Trades, Professional Licenses, Business and Contractor's Licenses)
- ☐ 6. Copy of KCMO Business License for current year
- ☐ 7. Copies of Contracts or invoices for services that you perform (3 for each scope of work)
- ☐ 8. Current Copy of Employee Payroll

### FOR CORPORATIONS ONLY

- ☐ 1. Minutes of all stockholders and board of directors meetings for the last year

### FOR PARTNERSHIPS ONLY

- ☐ 1. Any amendments to the most recent partnership agreement made within the last year

ADDITIONAL DOCUMENTATION MAY BE REQUIRED AFTER FURTHER ANALYSIS